2006

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

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(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered year ending 12/31/06 (Mo.) (Day) (Yr.) Franktown 66 801/6

Item Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Proportionate amounts contributed by each employer (Identify employers, under Reimbursed Personal Living and Travel * Total Amount for Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity

Do Not Have to be Reported All Employers Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services Total

when the number of employers you are reporting for requires multiple E-2 forms to be filled a total amount for all employers should be effected on rage 1.										
Item	The totals	The totals of each expenditure of more than fifty dollars (S50) for a legislator or other holder of public office.								
2	Date	Place	Amount	Names of Legislators & Public Officials in Group						
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Continued on attached page(s)

Item Employer(s) Name(s) and Address(es) INSTRUCTIONS 333 John Corlyle Sw.+ 530 Who should file this form: Any lobbyist registered under Section Alexandria, VA 22314 67-6617 Idaho Code. Filing deadline: Annual report is due on January 31st. No.2 TO BE FILED WITH: Ben Ysursa No.3 Secretary of State PO Box 83720 Boise, ID 83720-0080 No.4 Phone: (208) 334-2852 Fax: (208) 334-2282

2 of 2.

tem	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.										
4	Date Amount					Name of Legislator Receiving	or Ben	fited			
				August							
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tem 5	Subject matter of proposed legislation, the number of the Sconte or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.					LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject					
biect	Code	-			riation Bill Number	Code Subject Ol Agriculture, horticulture,	17	Health service, medicine, drug			
from t	able)	Legislat	ive Ident, Numbe		Section Number	firming, and livestock OZ Amusements, games, athletics and sports	18	and controlled substances, her insurance, hospitals Higher education			
50 01		SCA	291			03 Banking, finance, credit and investments	19	Housing, construction, codes Insurance (excluding health			
			·.	-		04 Children, minors, youth, senior citizens	21	insurance) Labor, salaries and wages,			
				1		05 Church and religion 06 Consumer affairs 07 Reology, environment, pollution,	22	collective bargaining Law enforcement, courts, judges, crimes, prisons			
						conservation, zoning, land and water use	23 24	License, permits Liquor			
			·,·			08 Education 09 Elections, campaigns, voting, political parties	25 26	Manufacturing, distribution a services Natural resources, forest and			
,					+5	10 Equal rights, civil rights, minority affairs	20	forest products, fisheries, min and mining products			
					• .	11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	27 28	Public lands, parks, recreation Social insurance, unemployme insurance, public assistance,			
		-	· · · · · · · · · · · · · · · · · · ·	-		12 Government, county 13 Government, federal	29	workmen's compensation Transportation, highways,			
						14 Government, municipal 15 Government, special districts 16 Government, state	30	streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas			
							31	Other (please specify)			
			t		2	1111					
						Labbyist signature	· 	12/3//06 Date			
						Charte Mr.	4	12/3/46			
		. •				Employer 1966 1 stgnature		Date			
						Employer No. 2 signature		Date			
				<u> </u>		Employer No. 3 signature		Date			
			cby certify that the dence with Section		a true, complete and I Idaho Cade.			· .			
						Employer No. 4 signature		Date			